

Atty. Docket No.: FLO002-091

COMMISSIONER FOR PATENTS  
PO Box 1450  
Alexandria, VA 22313-1450  
Sir:



Transmitted herewith for filing under 35 U.S.C. 111 and 37 CFR 1.53 is the ☐ Design ☒ Utility patent application of:

**Inventor:** Flowers et al.  
**Entitled:** Fluorine Gas Treatment of Washign Machine Parts

☒ Customer Number or Bar Code Label



Enclosed are:

- ☒ 17 page(s) of written description, claims and abstract
- ☒ 2 sheet(s) of drawings (☒ formal ☐ informal)
- ☒ An assignment of the invention to: Maytag Corporation
- ☒ Executed (original or copy) declaration of the inventor(s).
- ☐ A certified copy of a priority document.
- ☐ Applicant claims small entity status (see 37 CFR 1.27)
- ☐ Preliminary Amendment.
- ☒ Information Disclosure Statement w/ 18 refs.
- ☒ Return Receipt Postcard
- ☐ CONTINUING APPLICATION (see requisite information below and accompanying preliminary amendment, or Application Data Sheet under 37 CFR 1.76):
- ☐ Continuation ☐ Divisional ☐ Continuation-In-Part (CIP) of prior application
- ☐ Copy of declaration of the inventor(s) from a prior application (Continuation/Divisional information completed above)
- Prior application information: Examiner: Group Art Unit:

The filing fee has been calculated as shown below:

ITEM	AS FILED	# EXTRA	SMALL ENTITY	FULL FEE
Basic Fee			<input type="checkbox"/> Utility. . . . . \$375.00	<input checked="" type="checkbox"/> Utility . . . . \$750.00
			<input type="checkbox"/> Design. . . . . \$165.00	<input type="checkbox"/> Design. . . . \$330.00
Total Claims	20 - 20 =	0	x \$9 =	x \$18 =
Independent Claims	2 - 3 =	0	x \$42 =	x \$84 =
Multiple Dependent Claims in Proper Form Presented			+ \$140 =	+ \$280 =
<b>TOTAL:</b>			\$	\$ 750.00

- ☒ A check in the amount of \$790.00 to cover the filing fee (and assignment recordation fee, if any) is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication, including patent application filing fees and processing fees under 37 CFR 1.16 and 37 CFR 1.17 or credit any overpayment to Deposit Account No. 04-1075. A duplicate copy of this paper is enclosed.

**PLEASE SEND ALL  
CORRESPONDENCE TO:**

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Date: July 11, 2003

Respectfully submitted,

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